

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

ADDRESS (number and street)

1111 N PLAZA DRIVE SUITE 550

☐Check if different
than previously
reported. (ACC)

SCHAUMBURG

IL

60173

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00273003

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☒October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2006

through

09

30

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Wendy J. Weiser

Signature of Treasurer

Electronically Filed by Wendy J. Weiser

Date

10

11

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		136632.01
(b) Cash on Hand at Beginning of Reporting Period	123600.94	
(c) Total Receipts (from Line 19)	18759.76	161254.61
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	142360.70	297886.62
7. Total Disbursements (from Line 31)	69302.34	224828.26
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	73058.36	73058.36
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	14610.00	130570.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	2725.00	22401.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	17335.00	152971.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	17335.00	152971.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	4000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1424.76	4283.61
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	18759.76	161254.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	18759.76	161254.61

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	802.34	3161.26
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	802.34	3161.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	68500.00	221667.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	69302.34	224828.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	69302.34	224828.26

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	17335.00	152971.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17335.00	152971.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	802.34	3161.26
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	802.34	3161.26

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Full Name (Last, First, Middle Initial)

A. Dr. Chester Algood, MD

Mailing Address 10007 SW 52nd Rd.

City State Zip Code
 Gainesville FL 32608

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Florida

Occupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 1 / 2 0 0 6

Transaction ID: SA11A1.13851

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Scott Baranoff, MD

Mailing Address 613 Lido Dr.

City State Zip Code
 Boulder City NV 89005

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Academy of Urology

Occupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.13836

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. John Britton Jr., MD

Mailing Address 5 Guerard Rd

City State Zip Code
 Charleston SC 29407

FEC ID number of contributing
federal political committee.

C

Name of Employer
John J. Britton Jr., M.D.

Occupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 7 / 2 0 0 6

Transaction ID: SA11A1.13931

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 32

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

A. Full Name (Last, First, Middle Initial)

Dr. Jennifer Burns, MD

Mailing Address 2062 River Point Court

City State Zip Code
 DePere WI 54115

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Iowa

Occupation
Urologist

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 1 / 2 0 0 6

Transaction ID: SA11A1.13933

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Dr. Monte Cordray, MD

Mailing Address 5112 Leytonstone Court

City State Zip Code
 Terre Haute IN 47803

FEC ID number of contributing
federal political committee.

C

Name of Employer
A.P. & S

Occupation
Urologist

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.13859

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Dr. Timothy Duffin, MD

Mailing Address 407 Bentbrook Dr.

City State Zip Code
 Clarksville TN 37043

FEC ID number of contributing
federal political committee.

C

Name of Employer
Timothy K. Duffin, M.D.

Occupation
Urologist

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.13867

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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PAGE 8 / 32

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

A. Full Name (Last, First, Middle Initial) Dr. Curtis Dunshee, MD Mailing Address 3005 E. Manzarita Ridge Place City State Zip Code Tucson AZ 85718 FEC ID number of contributing federal political committee. C Name of Employer Urologic Associates Occupation Urologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 Transaction ID: SA11A1.13847 Amount of Each Receipt this Period 250.00
B. Full Name (Last, First, Middle Initial) Mr. John Farrer, MD Mailing Address 4412 Green Cove St. NW City State Zip Code Olympia WA 98502 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Urologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 535.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 6 Transaction ID: SA11A1.13831 Amount of Each Receipt this Period 535.00
C. Full Name (Last, First, Middle Initial) Dr. Thomas Fassuliotis, MD Mailing Address 4085 Cochran Rd City State Zip Code Gainesville GA 30506 FEC ID number of contributing federal political committee. C Name of Employer Gainesville Urology Occupation Urologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6 Transaction ID: SA11A1.13838 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional) ▶		1035.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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PAGE 9 / 32

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

A. Full Name (Last, First, Middle Initial) Dr. Melvin Fussell, MD		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 1 / 2 0 0 6	
Mailing Address 110 Sweet Bay Drive		Transaction ID: SA11A1.13929	
City Kathleen	State GA	Zip Code 31047	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Melvin Fussell, MD		Occupation Urologist	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Dr. A. Gianitsos, MD		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 1237 Geneva National Ave., West		Transaction ID: SA11A1.13855	
City Lake Geneva	State WI	Zip Code 53147	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Mercy Men's Health Center		Occupation Urologist	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Dr. Andre Godet, MD		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 8 / 2 0 0 6	
Mailing Address 3260 Providence Dr		Transaction ID: SA11A1.13849	
City Anchorage	State AK	Zip Code 99508	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Alaska South Central Urology Specialis		Occupation Urologist	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 10 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

A. Full Name (Last, First, Middle Initial) Dr. Robert Graves, MD Mailing Address 50406 Panorama Drive City State Zip Code Scottsbluff NE 69361 FEC ID number of contributing federal political committee. C Name of Employer Scottsbluff Urology Associates, P.C. Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Urologist Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 Transaction ID: SA11A1.13860 Amount of Each Receipt this Period 250.00
B. Full Name (Last, First, Middle Initial) Dr. David Grossklaus, MD Mailing Address 3229 E. Enrose Street City State Zip Code Mesa AZ 85213 FEC ID number of contributing federal political committee. C Name of Employer David Grossklaus, MD Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Urologist Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 Transaction ID: SA11A1.13925 Amount of Each Receipt this Period 250.00
C. Full Name (Last, First, Middle Initial) Dr. Robert Grubb III, MD Mailing Address 7463 York Drive City State Zip Code Calyton MO 63105 FEC ID number of contributing federal political committee. C Name of Employer Washington University Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Urologist Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 Transaction ID: SA11A1.13938 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional) ▶		750.00
TOTAL This Period (last page this line number only) ▶		

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Full Name (Last, First, Middle Initial)

A. Dr. David Harper, MD

Mailing Address 2222 E. 25th Place

City	State	Zip Code
Tulsa	OK	74114

FEC ID number of contributing
federal political committee.

C

Name of Employer
Urologic Specialists of
Oklahoma, Inc.Occupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.13896

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Mohamed Helal, MD

Mailing Address 15918 Dawson Ridge Dr.

City	State	Zip Code
Tampa	FL	33647

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tampa Urology InstituteOccupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.13844

Amount of Each Receipt this Period

535.00

Full Name (Last, First, Middle Initial)

C. Dr. John Holstine, MD

Mailing Address 2147 Knollwood

City	State	Zip Code
Fairmont	MN	56031

FEC ID number of contributing
federal political committee.

C

Name of Employer
John D. Holstine, M.D.Occupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Transaction ID: SA11A1.13880

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1035.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

A. Full Name (Last, First, Middle Initial)

Dr. David Howard, MD

Mailing Address 455 Sioux Point Rd

City State Zip Code

Dakota Dunes

SD

57049

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sioux City Urological

Occupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.13912

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Dr. James Iwakiri, MD

Mailing Address 3228 Cherrywood Lane

City State Zip Code

Eau Claire

WI

54701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Western Wisconsin Urology,
SC

Occupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.13872

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Dr. Daniel Jaffee, MD

Mailing Address 228 Freeman Pkwy

City State Zip Code

Providence

RI

02906

FEC ID number of contributing
federal political committee.

C

Name of Employer
RI Urological Specialties

Occupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 0 6

Transaction ID: SA11A1.13936

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

A. Full Name (Last, First, Middle Initial) Dr. Claus Kolln, MD Mailing Address 2111 Cottage Grove Ln., SE City State Zip Code Cedar Rapids IA 52403 FEC ID number of contributing federal political committee. C Name of Employer P.C.I. Urology Occupation Urologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 7 / 2 0 0 6 Transaction ID: SA11A1.13891 Amount of Each Receipt this Period 100.00
B. Full Name (Last, First, Middle Initial) Dr. Patrick Kronmiller, MD Mailing Address 50 S. Medical Dr., Ste 1 City State Zip Code Payson UT 84651 FEC ID number of contributing federal political committee. C Name of Employer Patrick W. Kronmiller Occupation Urologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 Transaction ID: SA11A1.13829 Amount of Each Receipt this Period 250.00
C. Full Name (Last, First, Middle Initial) Dr. Warren Lowry, MD Mailing Address 2411 Elder Lane City State Zip Code Rockford IL 61107 FEC ID number of contributing federal political committee. C Name of Employer Warren L. Lowry, MD Occupation Urologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 635.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 1 / 2 0 0 6 Transaction ID: SA11A1.13879 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional) ▶		450.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Full Name (Last, First, Middle Initial)

A. Dr. Shaun Maloney, MD

Mailing Address 24 Cicero Ln

City State Zip Code
 Austin TX 78746

FEC ID number of contributing federal political committee.

C

Name of Employer
Urology Associates of Wil-
liamson CountOccupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.13900

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Kalpesh Patel, MD

Mailing Address 800 E Via Linterna

City State Zip Code
 Tucson AZ 85718

FEC ID number of contributing federal political committee.

C

Name of Employer
Urology Assoc. of Essex
North, Inc.Occupation
urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.13905

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Mark Plante, MD

Mailing Address 77 Overlake Dr.

City State Zip Code
 Colchester VT 05446

FEC ID number of contributing federal political committee.

C

Name of Employer
University of VermontOccupation
None Indicated

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 0 / 2 0 0 6

Transaction ID: SA11A1.13956

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

A. Full Name (Last, First, Middle Initial) Mr. Anthony Quinn, Mailing Address 55 Bitterweet Drive City State Zip Code Ledyard CT 06335 FEC ID number of contributing federal political committee. C Name of Employer Uniformed Service Univ. of Health Scie Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Urologist Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 7 / 2 0 0 6 Transaction ID: SA11A1.13914 Amount of Each Receipt this Period 250.00
B. Full Name (Last, First, Middle Initial) Dr. James Robertson, MD Mailing Address 205 Ridge Trail Rd. City State Zip Code Bozeman MT 59715 FEC ID number of contributing federal political committee. C Name of Employer Bozeman Urological Associ-ates Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Urologist Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 Transaction ID: SA11A1.13835 Amount of Each Receipt this Period 250.00
C. Full Name (Last, First, Middle Initial) Dr. Mark Rosen, MD Mailing Address 3205 Park Ave City State Zip Code Soquel CA 95073 FEC ID number of contributing federal political committee. C Name of Employer Mark Rosen, MD, PA Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Urologist Aggregate Year-to-Date ▼ 535.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 0 / 2 0 0 6 Transaction ID: SA11A1.13884 Amount of Each Receipt this Period 535.00

SUBTOTAL of Receipts This Page (optional)

1035.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Full Name (Last, First, Middle Initial)

A. Dr. Susan Rusnack, MD

Mailing Address 130 W 79th St Apt 18A

City	State	Zip Code
New York	NY	10024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Columbia UniversityOccupation
Resident Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	1	/	2	0	0	6

Transaction ID: SA11A1.13954

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Animesh Sahai, MD

Mailing Address 308 Pine St.

City	State	Zip Code
Berea	KY	40403

FEC ID number of contributing
federal political committee.

C

Name of Employer
Animesh Sahai, MD PLLCOccupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	1	/	2	0	0	6

Transaction ID: SA11A1.13886

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Joseph Schultz, MD

Mailing Address 2 Drury Lane

City	State	Zip Code
Mobile	AL	36608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mobile Urology Group, P.A.Occupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	6

Transaction ID: SA11A1.13893

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

A. Full Name (Last, First, Middle Initial) Dr. Keith Schulze, MD Mailing Address Kitsap Urology Associates City State Zip Code Bremerton WA 98310 FEC ID number of contributing federal political committee. C Name of Employer Kitsap Urology Associates Occupation Urologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 6 Transaction ID: SA11A1.13888 Amount of Each Receipt this Period 250.00
B. Full Name (Last, First, Middle Initial) Dr. Brian Shaffer, MD Mailing Address 18830 NW Shadow Ln City State Zip Code Portland OR 97229 FEC ID number of contributing federal political committee. C Name of Employer Urologic Consultants P.C. Occupation Urologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 735.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 6 Transaction ID: SA11A1.13832 Amount of Each Receipt this Period 535.00
C. Full Name (Last, First, Middle Initial) Dr. John Shelgren Jr., MD Mailing Address 2509 Partridge Dr. City State Zip Code Winter Haven FL 33884 FEC ID number of contributing federal political committee. C Name of Employer Urology Associates of Central Florida Occupation Urologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6 Transaction ID: SA11A1.13874 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional) ▶		1035.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Full Name (Last, First, Middle Initial)

A. Dr. Thomas Shook, MD

Mailing Address 12 Eagle Point Dr.

City State Zip Code
 Savannah GA 31406

FEC ID number of contributing
federal political committee.

C

Name of Employer
Urology Specialists of Co-
astal Georgia

Occupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.13870

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Dr. Neal Shore, MD

Mailing Address 4 Nelson Court

City State Zip Code
 Myrtle Beach SC 29572

FEC ID number of contributing
federal political committee.

C

Name of Employer
Grand Strand Urology

Occupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.13843

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

C. Dr. Michael Solomon, MD

Mailing Address 405 NW Dover Court

City State Zip Code
 Port St. Lucie FL 34983

FEC ID number of contributing
federal political committee.

C

Name of Employer
Michael Solomon, MD

Occupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 1 / 2 0 0 6

Transaction ID: SA11A1.13911

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

A. Full Name (Last, First, Middle Initial) Dr. Donald Spicer, MD Mailing Address 11 West Vale City Paducah State KY Zip Code 42003 FEC ID number of contributing federal political committee. C Name of Employer Urology Group of Paducah, P.S.C. Occupation urologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 Transaction ID: SA11A1.13907 Amount of Each Receipt this Period 250.00
B. Full Name (Last, First, Middle Initial) Dr. Frank Splann Jr., MD Mailing Address 4409 Edmondson Ave. City Dallas State TX Zip Code 75205 FEC ID number of contributing federal political committee. C Name of Employer Urology Associates Occupation Urologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 575.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 Transaction ID: SA11A1.13902 Amount of Each Receipt this Period 250.00
C. Full Name (Last, First, Middle Initial) Dr. Ekiong Tan, MD Mailing Address 515 S. Green Dolphin Dr. City Cape Haze State FL Zip Code 33947 FEC ID number of contributing federal political committee. C Name of Employer Ekiong C. Tan M.D., PA Occupation Urologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 535.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 Transaction ID: SA11A1.13916 Amount of Each Receipt this Period 535.00
SUBTOTAL of Receipts This Page (optional) ▶		1035.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

A. Full Name (Last, First, Middle Initial)

Dr. Lay-Hwee Tan, MD

Mailing Address 4948 Flynt Dr.

City State Zip Code
 Marianna FL 32446

FEC ID number of contributing
federal political committee.

C

Name of Employer
URL Center

Occupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.13918

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Dr. Ramesh Unni, MD

Mailing Address 371 E 84th Dr.

City State Zip Code
 Merrillville IN 46410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Indiana University Medical
Ctr.

Occupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 1 / 2 0 0 6

Transaction ID: SA11A1.13935

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)

Dr. Alan Weinberg, MD

Mailing Address 301 W. Bastanchury Rd, #180

City State Zip Code
 Fullerton CA 92835

FEC ID number of contributing
federal political committee.

C

Name of Employer
Urological Medical Group

Occupation
Urologist

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.13882

Amount of Each Receipt this Period

535.00

SUBTOTAL of Receipts This Page (optional)

1285.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

A. Full Name (Last, First, Middle Initial) Dr. Randall Willis, MD Mailing Address 2015 Oak Trail Drive City State Zip Code Stillwater OK 74074 FEC ID number of contributing federal political committee. C Name of Employer Cimarron Urology, Inc. Occupation Urologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 4 / 2 0 0 6 Transaction ID: SA11A1.13901 Amount of Each Receipt this Period 100.00
B. Full Name (Last, First, Middle Initial) Dr. Wen Yap, MD Mailing Address 4348 Hilton Head Dr City State Zip Code Oneida WI 54155 FEC ID number of contributing federal political committee. C Name of Employer Urology Associates of Green Bay SC Occupation Urologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 7 / 2 0 0 6 Transaction ID: SA11A1.13878 Amount of Each Receipt this Period 1000.00
C. Full Name (Last, First, Middle Initial) Dr. Kareem Zaki, MD Mailing Address 120 Akers Farm Road City State Zip Code Christianburg VA 24073 FEC ID number of contributing federal political committee. C Name of Employer Urology Assoc. of New River Valley, P. Occupation Urologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 Transaction ID: SA11A1.13834 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional) ▶		1350.00
TOTAL This Period (last page this line number only) ▶		14610.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 32

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

A. Full Name (Last, First, Middle Initial) Bank One		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 1 / 2 0 0 6	
Mailing Address 111 E. Busse Avenue, 5th Floor		Transaction ID: SA17.13777	
City Mt. Prospect	State IL	Zip Code 60056	Amount of Each Receipt this Period 1013.77
FEC ID number of contributing federal political committee. C		Interest	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3872.62		

B. Full Name (Last, First, Middle Initial) Bank One		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6	
Mailing Address 111 E. Busse Avenue, 5th Floor		Transaction ID: SA17.13959	
City Mt. Prospect	State IL	Zip Code 60056	Amount of Each Receipt this Period 410.99
FEC ID number of contributing federal political committee. C		Interest	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4283.61		

SUBTOTAL of Receipts This Page (optional)

1424.76

TOTAL This Period (last page this line number only)

1424.76

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Full Name (Last, First, Middle Initial)

A. Bank One

Mailing Address 111 E. Busse Avenue, 5th Floor

City Mt. Prospect State IL Zip Code 60056

Purpose of Disbursement

Bank Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.13776

Date of Disbursement

08 / 31 / 2006

Amount of Each Disbursement this Period

759.08

Full Name (Last, First, Middle Initial)

B. Bank One

Mailing Address 111 E. Busse Avenue, 5th Floor

City Mt. Prospect State IL Zip Code 60056

Purpose of Disbursement

Bank Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.13960

Date of Disbursement

09 / 30 / 2006

Amount of Each Disbursement this Period

43.26

SUBTOTAL of Disbursements This Page (optional)

802.34

TOTAL This Period (last page this line number only)

802.34

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 32

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Full Name (Last, First, Middle Initial)

A. BASS VICTORY COMMITTEE

Mailing Address PO Box 3451
PO Box 3451

City Concord State NH Zip Code 03302

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President

State: NH District: 02

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.13789

Date of Disbursement

08 / 29 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CAPITO, SHELLEY MOORE

Mailing Address 2 Comstock Place

City CHARLESTON State WV Zip Code 25314

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President

State: WV District: 02

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.13786

Date of Disbursement

08 / 02 / 2006

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. CAPPS, LOIS G

Mailing Address 1724 SANTA BARBARA STREET

City SANTA BARBARA State CA Zip Code 93101

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 23

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.13801

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 / 32

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Full Name (Last, First, Middle Initial)

A. CHAFEE, LINCOLN D

Mailing Address PO BOX 7329

City
WARWICK

State
RI

Zip Code
02887

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: RI District: 00

Transaction ID: SB23.13811

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. COMMITTEE FOR THE PRESERVATION OF CAPITALISM (CPC), THE

Mailing Address P.O. Box 65314

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Transaction ID: SB23.13793

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. DEWINE FOR US SENATE

Mailing Address PO BOX 340188

City
COLUMBUS

State
OH

Zip Code
43234

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 00

Transaction ID: SB23.13797

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 / 32

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Full Name (Last, First, Middle Initial)

A. ESHOO, ANNA

Mailing Address 555 Capitol Mall Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
ck cancelled, never received by campaign

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 14

Transaction ID: SB23.13957

Date of Disbursement

08 / 01 / 2006

Amount of Each Disbursement this Period

-2000.00

Full Name (Last, First, Middle Initial)

B. ESHOO, ANNA

Mailing Address 555 Capitol Mall Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 14

Transaction ID: SB23.13807

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. GORDON, BARTON JENNINGS

Mailing Address 940 EAST NORTHFIELD BOULEVARD

City MURFREESBORO State TN Zip Code 37130

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 06

Transaction ID: SB23.13780

Date of Disbursement

07 / 19 / 2006

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 / 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Full Name (Last, First, Middle Initial)

A. HIGGINS, BRIAN M.

Mailing Address PO Box 28

City
Buffalo

State
NY

Zip Code
14220

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 27

Transaction ID: SB23.13819

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. HULSHOF, KENNY CHARLES

Mailing Address 24 BINGHAM

City
COLUMBIA

State
MO

Zip Code
65203

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: MO District: 09

Transaction ID: SB23.13791

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. KEEP OUR MAJORITY PAC

Mailing Address PO Box 20209

City
Alexandria

State
VA

Zip Code
22320

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Transaction ID: SB23.13799

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 / 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Full Name (Last, First, Middle Initial)

A. KYL, JON L

Mailing Address 4442 E CAMELBACK ROAD #160

City PHOENIX State AZ Zip Code 85018

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2006 ☐ Primary ☒ General ☐ Other (specify) ▼
 State: AZ District: 00

Transaction ID: SB23.13823

Date of Disbursement

09 / 27 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. LIEBERMAN, JOSEPH I

Mailing Address PO BOX 231294 STATE HOUSE SQUARE

City HARTFORD State CT Zip Code 06123

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2006 ☒ Primary ☐ General ☐ Other (specify) ▼
 State: CT District: 00

Transaction ID: SB23.13782

Date of Disbursement

08 / 02 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. MCCULLOCH, ALLEN WILSON

Mailing Address PO BOX 5102

City FARMINGTON State NM Zip Code 87499

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2006 ☐ Primary ☒ General ☐ Other (specify) ▼
 State: NM District:

Transaction ID: SB23.13803

Date of Disbursement

09 / 08 / 2006

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Full Name (Last, First, Middle Initial)

A. NORWOOD FOR CONGRESS

Mailing Address PO Box 499
PO BOX 499

City Evans State GA Zip Code 30809

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President

State: GA District: 10

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.13821

Date of Disbursement

09 / 27 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. PALLONE FOR CONGRESS

Mailing Address PO BOX 3176

City LONG BRANCH State NJ Zip Code 07740

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 06

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.13815

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. PRICE, THOMAS EDMUNDS MD

Mailing Address 295 BROADMEADOW COVE

City ROSWELL State GA Zip Code 30075

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President

State: GA District: 06

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.13809

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 / 32

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Full Name (Last, First, Middle Initial)

A. REYNOLDS, THOMAS M

Mailing Address 8261 OLD POST ROAD EAST

City CLARENCE State NY Zip Code 14051

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2006 ☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 26

Transaction ID: SB23.13795

Date of Disbursement

08 / 29 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. SANTORUM 2000

Mailing Address 46 ORDALE BLVD

City PITTSBURGH State PA Zip Code 15228

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2006 ☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.13817

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. SHADEGG, JOHN B.

Mailing Address P. O. Box 45444

City Phoenix State AZ Zip Code 85064

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2006 ☐ Primary ☒ General
☐ Other (specify) ▼

State: AZ District: 03

Transaction ID: SB23.13825

Date of Disbursement

09 / 27 / 2006

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 / 32

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Full Name (Last, First, Middle Initial)

A. SIMMONS, ROB

Mailing Address P.O. Box 268 Drawer 271

City Stonington State CT Zip Code 06378

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2006 ☐ Primary ☒ General
☐ Other (specify) ▼

State: CT District: 2

Transaction ID: SB23.13805

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. SNOWE, OLYMPIA J

Mailing Address PO BOX 2006

City PORTLAND State ME Zip Code 04104

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2006 ☐ Primary ☒ General
☐ Other (specify) ▼

State: ME District: 00

Transaction ID: SB23.13778

Date of Disbursement

07 / 10 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. TRUST PAC TEAM REPUBLICANS FOR UTILIZING SENSIBLE TACTICS

Mailing Address 228 S. Washington Street
Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2006 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.13813

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 / 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS POLITICAL ACTION COMMITTEE (UROPAC)

Full Name (Last, First, Middle Initial)

A. WAKIM, CHRIS

Mailing Address ONE HAMILTON AVENUE

City
WHEELING

State
WV

Zip Code
26003

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: WV District: 01

Transaction ID: SB23.13784

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	2		2	0	0	6

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

68500.00